

**REPUBLIC OF TRINIDAD AND TOBAGO****BOARD OF INLAND REVENUE**

Certificate No

APPLICATION FOR CERTIFICATES (OTHER THAN EXIT CERTIFICATES)*(Where the Question is Not Applicable indicate by N/A)*

1. Name of Applicant 2. B.I.R. File No.
3. Private Address
4. Occupation 5. Date of Birth
6. Business Name and Address
7. Date of Commencement of Operations
8. Name and Address of Employer
9. Is Tax deducted from your Earnings under P.A.Y.E.
10. Purpose of Certificate
11. Closing Date of Tender (if Applicable)
12. Have you submitted Income or Corporation Tax Returns to this department for the last six years.

If not state particulars:

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13. Have you paid all Quarterly Instalments due (Corporations, Self-Employed Persons and others in receipt of non-emolument income)? ☐ Yes ☐ No

If No, give reasons

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14. Have you paid Tax/Unemployment Levy for previous years? ☐ Yes ☐ No

If No, give reasons

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I hereby declare that the particulars stated in this application are true and correct.

Date

Signature of Applicant

BOARD OF INLAND REVENUE USE ONLY

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